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Mexborough Urban District Council



REPORT

ON THE

Health of the District

DURING THE YEAR ENDING
DECEMBER 31st, 1952.

by

Dr. JOHN LEIPER, M.B.E.

Medical Officer of Health

together with the

Report of the Chief Sanitary
Inspector

Mr. H. BREARLEY

Mexborough Urban District Council



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MEXBOROUGH URBAN DISTRICT COUNCIL

MEMBERS, 1952.

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Mexborough Urban District Council.

ANNUAL REPORT OF THE MEDICAL OFFICER OF HEALTH FOR THE YEAR 1952.

Divisional Public Health Office,
Council Offices,
Adwick Road,
Mexborough.

Mr. Chairman, Lady and Gentlemen,

I have the honour to present my Annual Report for the year 1952, and I trust that you will find in this Report an interesting picture of the health of your District.

The general health of your District during the year I consider to be quite satisfactory, and this is confirmed by the low Infant Mortality Rate for the District, your very low Death Rate, and although it is falling, the Birth Rate in your District is up to the general average of the country.

It is again my duty to report that there were no deaths from Diphtheria and this is associated with the fact that our efforts to keep the number of children protected by immunisation are continuing from year to year.

The aspect of your District is changing, and more accent has been put on industrialisation. Your compact Urban District has still a housing problem, owing to the difficulty of obtaining good sites for development, and this problem is also secondary to the difficulties of water supply. The water supply comes mainly from local sources, and a glance at the annual rainfall last year, as compared with other years, clearly shows that the time has come when local water is not sufficient for the needs of the District.

The causes of death in your District have now completely changed from infection, which carried away so many in the not far distant past, and indeed the main causes of death by far are diseases of the heart and blood vessels and malignant disease.

The problem of atmospheric pollution is one of which the records are being kept by Mr. Brearley's Department. It is my personal opinion that the damage to health of the in-

nabitants of your District consequent upon atmospheric pollution mostly follows those cold winter days in which smog is breathed by us all, with consequent nasal catarrh and bronchial irritations. The solution to this problem must be found nationally. It is found that public opinion to-day is becoming more pollution-conscious.

The Preventive Medical Services administrated on behalf of the County Council by myself in your District have continued to be run smoothly and efficiently. During the year the medical division of which I am Divisional Medical Officer has been re-graded to become an "A" Division, of which there are 12 in the County.

The Home Nursing Service is still increasing, and I certainly feel that it has been of the greatest help that the Council has allocated tenancies, so that when vacancies occur in the Home Nursing and Midwifery Services these can be advertised saying that accommodation has been made available by the District Council.

I feel that it is fair to say that in the field of preventive medicine, workers either in the purely medical or social fields are no longer working in water-tight compartments, but there is a team spirit which has been very successful in such matters as the prevention of child neglect, the adequate care of the aged in difficult circumstances, and also in the sphere of the problem family.

It is pleasing to report that there were no cases of Food Poisoning notified and that the inspection of premises in which food is prepared and handled, together with the help and co-operation of the food tradespeople, has gone a long way to produce this satisfactory result.

I wish to thank your Chief Sanitary Inspector and his Department for their help and assistance during the year, and I wish to thank the Council for their interest and co-operation in all Public Health matters. Also I wish to say that I have enjoyed the easy working with the Clerk and all Officers of the Council during the year and to thank them for their valued advice and co-operation.

Finally, I wish to thank my Divisional Medical Office staff for their efficiency during the year and their help in the compilation of this Report.

I remain,

Your obedient servant,

JOHN LEIPER,

Medical Officer of Health,
Mexborough Urban District Council.

SECTION A.

NATURAL AND SOCIAL CONDITIONS OF THE AREA

Area (in acres)	...	...	...	...	...	1,452
Registrar General's estimate of Resident Population						
mid 1952	...	...	...	...	...	19,230
Number of inhabited houses (31st December, 1952)						5,231
Rateable Value	...	...	...	...	...	£79,124
Net Product of a Penny Rate			...	...	...	£295
Height above sea level (in feet)			...	...	...	50-250
Rainfall for year (in inches)	...		...	...	...	17.42
Number of days on which rain fell	...		...	...	...	143
Mean Temperature	...	...	...	...	...	49.40°F

Mexborough, situated in the heart of South Yorkshire, is a typical industrial market town of 1,452 acres, with a population of nearly 20,000. It is built, for the most part on sandstone and gradually rising ground on the north side of the River Don, which forms the southern boundary of the Urban District.

The chief occupations are mining, engineering and printing, and various firms of a light industrial nature manufacturing scissors, umbrella frames, cardboard boxes, overalls, and cloth repairing, have been established in the town.

Unemployment for the male population is practically unknown, but of late there has been less demand for juvenile female labour, owing to the closing of those industries connected with the textile trades.

The mean temperature is about the average for the decade, but the rainfall was the lowest recorded since 1943.

As the water supplies of the District are dependent on the local rainfall, there has been some difficulty in this respect during 1952, and it seems likely that supplies will have to be imported to meet the increasing demands of the town.

I include, for easy reference, a Table showing the trends of the statistics given above during the last seven years :—

Deaths from :

Cancer (all ages)	...	...	...	...	...	38
Measles (all ages)	...	...	...	...	...	Nil
Whooping Cough (all ages)	...	...	...	...	...	Nil
Diarrhoea (under 2 years of age)	...	...	...	...	...	1
Pulmonary Tuberculosis (all ages)	...	...	...	...	...	6
Other forms of Tuberculosis (all ages)	...	...	...	...	...	Nil

The total number of live births, 308, is slightly higher than last year, but the decline noticed since 1951 still continues.

The number of still births (5) is the lowest ever recorded, and the Still Birth Rate at 15.97 per 1,000 Live and Still Births compares favourably with a rate of 22.6 for England and Wales as a whole.

In 1952, the deaths of 10 infants under one year were recorded, and this too is the lowest total recorded since records were kept. However, as the Birth Rate has fallen, the Infant Death Rate at 32.5 per 1,000 related live births is second to the lowest in 1950, when the rate was 31.6. I feel that the general trend in diminution of infant wastage in your District is quite satisfactory.

I am pleased to report that there were no fatal cases of Measles in the Mexborough Urban District during last year, and only one death from this disease has been recorded during the last 5 years. During the same period there were no fatal cases of Whooping Cough.

For the first time in 3 years a death is recorded from Diarrhoea (under 2 years of age).

Deaths from Pulmonary Tuberculosis numbered 6, compared with 12 in 1951, and this is the lowest number of deaths from this disease since 1936.

The deaths from Cancer at all ages continues at a high rate, and as these deaths reflect upon the increase in the number of old persons in your District and are not unassociated with the presence of atmospheric pollution, I include below a summary of the causes of death from malignant disease recorded in my Reports since 1948.

Deaths from Cancer.

	1948	1949	1950	1951	1952
	M. F.	M. F.	M. F.	M. F.	M. F.
Malignant Neoplasm Buccal cavity and Oesophagus (M)	1 —	1 —	— —	— —	— —
Malignant Neoplasm Uterus (F)	— 1	— 2	— 4	— 5	— 2
Malignant Neoplasm Stomach and Duodenum	4 6	4 —	6 2	5 3	5 —
Malignant Neoplasm Breast	— —	— 2	— 2	— 2	— 2
Malignant Neoplasm Lung, Bronchus	— —	— —	5 2	4 2	7 1
Malignant Neoplasm All other sites	11 8	12 8	12 5	13 3	16 5
Totals	16 15	17 12	23 15	22 15	28 10

The following Table gives details of all the causes of death recorded during the year 1952:—

Deaths from all causes during 1952

Cause of Death				Males.	Females.
1.	Tuberculosis, respiratory ...	...	...	5	1
2.	Tuberculosis, other ...	...	...	—	—
3.	Syphilitic disease ...	...	...	—	—
4.	Diphtheria ...	...	...	—	—
5.	Whooping Cough ...	...	...	—	—
6.	Meningococcal infections	...	...	—	—
7.	Acute Poliomyelitis ...	...	...	—	—
8.	Measles ...	...	...	—	—
9.	Other infective and parasitic diseases	...	...	—	—
10.	Malignant neoplasm, stomach ...	...	...	5	—
11.	Malignant neoplasm, lung, bronchus	...	...	7	1
12.	Malignant neoplasm, breast ...	...	...	—	2
13.	Malignant neoplasm, uterus ...	...	...	—	2
14.	Other malignant and lymphatic neoplasms	...	...	16	5
15.	Leukaemia, aleukaemia ...	...	...	—	—
16.	Diabetes ...	...	...	1	1
17.	Vascular lesions of nervous system	...	...	13	9
18.	Coronary disease, angina ...	...	...	9	5
19.	Hypertension with heart disease	...	...	1	—
20.	Other heart disease ...	...	...	10	11
21.	Other circulatory disease	...	...	1	1
22.	Influenza ...	...	...	—	—
23.	Pneumonia ...	...	...	1	3
24.	Bronchitis ...	...	...	12	4
25.	Other diseases of respiratory system	...	...	2	—
26.	Ulcer of stomach and duodenum	...	...	2	—

Cause of Death				Males.	Females.
27.	Gastritis, Enteritis and Diarrhoea	...	—	—	1
28.	Nephritis and Nephrosis	... ..	2	2	1
29.	Hyperplasia of prostate	... ..	5	—	—
30.	Pregnancy, childbirth, abortion	... ..	—	—	—
31.	Congenital malformations	... ..	1	1	1
32.	Other defined and ill-defined diseases	... ..	8	18	18
33.	Motor vehicle accidents	... ..	1	—	—
34.	All other accidents	... ..	6	3	3
35.	Suicide	... ..	—	1	1
36.	Homicide and operations of war	... ..	—	—	—
Total from all causes				108	70

The total number of deaths recorded from all causes during the year 1952 in your District was 178, a decrease of 52 deaths from the total of the previous year.

The main causes of death thus continue to be, Diseases of the Heart and Blood Vessels (60), Malignant Disease (38) and Bronchitis and Pneumonia (20).

The average age at death in your District in 1952 was 63·5 years.

I feel that the deaths from Bronchitis and Pneumonia, and also some of the deaths from Diseases of the Heart and Blood Vessels, may be related to the fact that the atmosphere is so heavily polluted, especially during the fog period at the end of the year.

The following Table shows the total number of deaths recorded each year in your District over the past nine years and the crude death rate per 1,000 estimated population :—

Year	Est. Mid-year Population	Total No. of Deaths	Crude Death Rate
1944	19,300	181	9·4 per 1,000
1945	19,300	197	10·2 „ „
1946	19,300	149	7·7 „ „
1947	19,080	204	10·7 „ „
1948	19,150	209	10·9 „ „
1949	19,270	189	9·8 „ „
1950	19,120	217	11·3 „ „
1951	18,730	230	12·3 „ „
1952	19,230	178	9·3 „ „

A comparison of the various rates in your District against the similar rates for England and Wales, the 160 County Boroughs, etc., and the 160 smaller towns, is appended:

	England and Wales.	160 C.B's and Great Towns (including London)	160 Smaller Towns (Res. Pop. 25,000-50,000 at 1951 Census)	London Administrative County	Mexbro' Urban District
Rates per 1,000 Home Population					
Births:					
Live Births	15.3	16.9	15.5	17.6	16.6
Still Births	0.35	0.43	0.36	0.34	0.26
	22.6(a)	24.6(a)	23.0(a)	19.2(a)	15.97(a)
Deaths:					
All Causes	11.3	12.1	11.2	12.6	10.83
Typhoid and Paratyphoid	0.00	0.00	0.00	—	0.00
Whooping Cough	0.00	0.00	0.00	0.00	0.00
Diphtheria	0.00	0.00	0.00	0.00	0.00
Tuberculosis	0.24	0.28	0.22	0.31	0.31
Influenza	0.04	0.04	0.04	0.05	0.00
Smallpox	0.00	—	—	—	—
Acute Poliomyelitis (including Polioencephalitis)	0.01	0.01	0.00	0.01	0.00
Pneumonia	0.47	0.52	0.43	0.58	0.21
Notifications: (Corrected)					
Typhoid Fever	0.00	0.00	0.00	0.00	0.00
Paratyphoid Fever	0.02	0.02	0.03	0.01	0.00
Meningococcal infection	0.03	0.03	0.03	0.02	0.10
Scarlet Fever	1.53	1.75	1.58	1.56	0.31
Whooping Cough	2.61	2.74	2.57	1.66	2.34
Diphtheria	0.01	0.01	0.03	0.01	0.00
Erysipelas	0.14	0.15	0.12	0.14	0.00
Smallpox	0.00	0.00	0.00	—	0.00
Measles	8.86	10.11	8.49	9.23	2.28
Pneumonia	0.72	0.80	0.62	0.57	1.64
Acute Poliomyelitis (including Polioencephalitis) Paralytic	0.06	0.06	0.06	0.06	0.00
Non-Paralytic	0.03	0.03	0.02	0.03	0.05
Food Poisoning	0.13	0.16	0.11	0.18	0.00
Puerperal Pyrexia	17.87(a)	23.94(a)	10.22(a)	30.77(a)	0.05(a)

Rates per 1,000 Live Births

Deaths:

All causes under 1 year of age	27.6(b)	31.2	25.8	23.8	32.5
Enteritis and Diarrhoea under 2 years of age.....	1.1	1.3	0.5	0.7	0.5

(a) Per 1,000 Total (Live and Still) Births

(b) Per 1,000 related Live Births

The above Table shows that in your District the Live Birth Rate was slightly higher than the corresponding rates for England and Wales, whereas the Still Birth Rate and the rate for Deaths from All Causes were lower than that for the country.

Infant Mortality Rate.

In 1951, the Infant Mortality Rate was 54·8 per 1,000 related live births, when 16 infants under the age of one year died during the year and there were 292 births. This year, 1952, has shown a lowering in the Infant Mortality Rate to 32·5 per 1,000 live births, i.e., 10 infants have died during the year, when there was a total of 308 live births.

It was reported last year that the pattern of deaths occurring in infants under one year of age in your District had reverted temporarily to that which had been found in the past, i.e., that these infant deaths were occurring predominantly in the age period between one month and one year.

As was anticipated last year, the pattern has changed in 1952 to such an effect that of the 10 infant deaths recorded, 8 occurred under one week (prematurity, congenital malformation and birth injury being the main causes) and only 2 occurred between 3 and 12 months of age.

The number of births occurring each year in your District is statistically low, and wide variations in the rates will occur from year to year, but as can be seen from the following Table, the general trend over the last 4 years (i.e., since the start of the Divisional Scheme in the West Riding of Yorkshire) is not unsatisfactory.

From this Table it will be noted that over the last 4 year period there has been a marked reduction in the number of infants under one year of age dying, but there has only been a slight diminution in the number of still births in your District. This would indicate to me that there is a further need for advice and ante-natal care in the group teaching of expectant mothers in your District.

A Table showing complete details of live births, still births, and infant deaths in your District over the past 15 years is also included :—

Period	Total Live Births	Total Still Births per 1,000	Total Deaths of Infants Under 1 year of age	Average Crude Birth Rate 1,000 est. Pop.	Still Birth Rate per 1,000 Live & Still Births	Infant Death Rate per 1,000 Live Births
1945-1948 (inclusive)	1,446	38	76	17·8	25·6	52·5
1949-1952 (inclusive)	1,316	31	54	17·2	23·0	41·0

Year	MEXBOROUGH U.D.		
	Live Births	Still Births	Total deaths of infants under 1 year
1938	290	12	16
1939	293	15	14
1940	306	18	16
1941	290	18	20
1942	304	11	20
1943	312	9	14
1944	376	12	22
1945	332	7	18
1946	346	12	20
1947	409	9	19
1948	359	10	19
1949	368	9	17
1950	348	8	11
1951	292	9	16
1952	308	5	10

The following Tables show the cause and age at death of infants under one year of age during the year, and also the time of the year in which these deaths occurred :—

Infants under 1 year of age, 1952

Cause of Death	AGE AT DEATH									
	Weeks				Months					
	Un- der 1	1-2	2-3	3-4	1-2	2-3	3-6	6-9	9-12	Total
Prematurity	3									3
Congenital Malformation	2									2
Birth Injury	2									2
Pneumonia				1		1				2
Asphyxia Neonatorum	1									1
TOTAL	8			1		1				10

Infant Deaths.

January	1	} First Quarter 3
February ...	...	...	...	.....	2
March ...	...	...	...	...	—
April	—	} Second Quarter 1
May ...	...	...	...	...	1
June ...	...	...	...	...	—
July	—	} Third Quarter 3
August ...	...	...	...	...	2
September ...	...	...	...	...	1
October	2	} Fourth Quarter 3
November ...	...	...	...	...	—
December ...	...	...	...	...	1

Maternal Mortality.

I am pleased to report that there were no maternal deaths in your District in the year 1952.

Finally, I include a Table comparing the various rates and vital statistics for your District with the rates for the aggregate of the Urban Districts in the West Riding and for the whole of the administrative County of the West Riding.

MEXBOROUGH URBAN DISTRICT

District	Estimated Home Population (Middle 1952)	Births			Deaths			Deaths under 1			Still Births		
		M	F	Total	M	F	Total	M	F	Total	M	F	Total
Mexborough U.	19,230	164	144	308	108	70	178	4	6	10	3	2	5
Aggregate of Urban Districts in the West Riding	1,157,000	9134	8533	17667	7273	6768	14041	300	232	532	234	221	455
Administrative County of the West Riding	1,590,000	12631	11875	24506	9567	8705	18272	416	320	736	323	295	618

CRUDE RATES
PER 1,000 POPULATION

District	Total Live and Still Births	Births	Deaths	Infective & Para. Dis. excl. Tub. but incl. Syph. & other V.D.	Tuberculosis Respiratory	Tuberculosis Other	Tuberculosis All Forms	Cancer	Vascular Lesions of the Nervous System	Heart and Circulatory	Respiratory Diseases	Maternal Mortality	Infant Mortality	Stillbirth
Mexborough U.	313	16.0	9.3	—	0.31	—	1.31	1.98	1.14	1.98	1.14	—	32.5	16.0
Aggregate of Urban Districts in the West Riding	18122	15.3	12.1	0.07	0.17	0.03	0.20	2.02	1.88	4.66	1.21	0.88	30.1	25.1
Administrative County of the West Riding	25124	15.4	11.5	0.07	0.16	0.03	0.19	1.92	1.74	4.35	1.15	0.80	30.0	24.6

* Rate per 1,000 live and stillbirths.

† Rate per 1,000 related live births.

SECTION B.

1. General Provision of Health Services for the Area.

Full particulars of the Public Health Officers of your Authority are printed at the beginning of this Report.

(a) Laboratory Facilities.

Bacteriological examinations are carried out at the Medical Research Council Laboratory, Wakefield, under the direction of Dr. H. T. Findlay.

During the year copies of reports have been received in this office showing results in respect of the undermentioned:-

Infectious Diseases	...	...	...	...	...	34
Water Samples	...	...	...	...	...	21
Milk Tests	...	...	...	...	...	59
Tuberculosis Cultures	...	...	...	...	...	70
Ice Cream Sampling	...	...	...	...	...	52
Total ...						<hr/> 236 <hr/>

The testing of samples of blood of expectant mothers for Rh factor and Kahn examination are carried out by the Regional Blood Transfusion Laboratory at Sheffield under the direction of Dr. C. C. Bowley. It is estimated that over 400 samples were sent during 1952 from the five Ante-Natal Clinics in this Area.

(b) Ambulance Facilities.

The ambulance facilities for your Urban District are under the supervision of the County Ambulance Officer, and the local depot for this service is at Dunford House, Wath-on-Deerne, where 6 ambulances were available. An additional vehicle in the reserve pool is also stationed at Wath-on-Deerne.

(c) Nursing in the Home.

During 1952, 10,949 Home Nursing visits were made to patients in the Mexborough Area. This figure compares with 11,632 in 1951 and 9,385 in 1950.

The staff at the end of the year consisted of two State Registered Nurses and one State Enrolled Assistant Nurse, two of whom possessed motor cars in order to carry out their duties. The number of Nurses for the Home Nursing Service in your town during the year was barely adequate, and over-work lead to sickness, which has resulted in one Nurse resigning because of ill-health.

The standard of nursing has been very good, and the majority of cases have continued to be cardio-vascular degenerative diseases of the aged. The work of the Home Nurse has been greatly appreciated by the general public, and by my colleagues in general practice.

(d) Treatment Centres and Clinics, including Clinics used solely for diagnosis or Consultation.

Mexborough Urban District.

Child Welfare Centre, Adwick Road, Mexborough.

Monday—	9.30 a.m. to 12 noon—	Ultra Violet Ray Clinic.
Tuesday—	9.30 a.m. to 12 noon—	Minor Ailments Clinic.
	2.00 p.m. to 4.30 p.m.—	Infant Welfare Clinic and Immunisation Clinic.
Wednesday—	2.00 p.m. to 4.30 p.m.—	Ante-Natal Clinic.
Thursday—	9.30 a.m. to 12 noon—	Minor Ailments Clinic.
	2.00 p.m. to 4.30 p.m.—	Infant Welfare Clinic.
Friday—	9.30 a.m. to 12 noon—	Ultra Violet Ray Clinic.

In addition, Ophthalmic Clinics and Paediatric Clinics are held here, about one or two sessions per month.

The Family Planning Association hold a Clinic in the Child Welfare Centre on the second and fourth Friday afternoons of every month.

(e) Child Welfare Centres.

Returns from the Child Welfare Centre at Mexborough during 1952 show that attendances were as follows. The comparative figures from 1949 are also shown below :—

	1952	1951	1950	1949
Under 1 year of age ...	3,773	4,004	3,827	4,592
Over 1 year of age ...	1,706	1,632	1,741	2,580

The decrease in attendances is commensurate with the fall in the number of Live Births registered during these years.

Greater emphasis is being given to Health Teaching at the Clinics rather than to the treatment of children.

The Hanovia Sun Lamp continues to be well used, and has proved beneficial to children in the Mexborough District who have required a course of treatment.

Seventy-six sessions were held during the year, at which 1,133 attendances were recorded.

(f) Ante-Natal Clinics.

Pending the Joint Appointment of a Medical Officer in Charge of Ante-Natal Clinics and Obstetrician at the Montagu Hospital, Mexborough, I have been in medical charge of the Ante-Natal Clinic at Mexborough.

During the year, 278 expectant mothers made 1,165 attendances.

It will be seen, therefore, that, as in 1951, 90% of all expectant mothers attended this clinic.

(g) Chest Clinics.

Patients requiring consultant examination may attend for this purpose at the Chest Clinic, Market Street, Mexborough. Sessions are held on :—

Monday ... 10.00 a.m. to 12 noon.

Wednesday ... 10.00 a.m. to 12 noon.

The staff at this Clinic consists of a Tuberculosis Officer and two Tuberculosis Health Visitors.

Close liaison is maintained between your Medical Officer of Health, the Chief Sanitary Inspector, and the Medical Staff of the Chest Clinic.

The new Chest Clinic, with X-ray facilities, situated at "Whateley House" The Montagu Hospital, Mexborough, is expected to be completed and staffed during 1953, and then the present premises in Market Street will be closed down.

(h) Venereal Diseases Clinics.

A treatment and diagnostic clinic is held at 12, Frederick Street, Rotherham, and there are other clinics at Barnsley, Sheffield and Doncaster.

(i) General Hospital Services.

These services for your District are provided in the main by the Montagu Hospital, Mexborough, Moorgate Hospital, Rotherham, and to a lesser extent, at the Beckett Hospital, Barnsley.

Complete liaison between the local Health Authority and the Hospital Management Committee has been maintained, and with the joint appointment of Dr. J. C. MacWilliam as Obstetrician at the Montagu Hospital, Mexborough, and Medical Officer in Charge of the Ante-Natal Clinics in Division 30 in January, 1953, complete co-ordination in the maternity field should be resumed.

(j) Infectious Disease Hospitals.

Infectious diseases cases from your District are admitted either to Kendray Isolation Hospital at Barnsley, or the Isolation Hospital at Doncaster.

Accommodation has proved entirely adequate for the number of cases arising in the Area requiring hospital isolation and treatment.

(k) Maternity Hospitals.

The maternity block of the Montagu Hospital Mexborough, Listerdale Maternity Home, Nr. Rotherham, and Western Hospital, Balby, Nr. Doncaster, have all been available during the year for the accommodation of booked cases on a priority system.

Of the total of 513 institutional births to mothers normally resident in the whole of this Division, 339 births occurred in the Montagu Hospital, Mexborough.

Other births occurred principally in the following hospitals :—

Western Hospital, Balby, Nr. Doncaster	...	52 births
Listerdale Maternity Home, Wickersley	...	37 births
St. Helen Hospital, Barnsley	... ..	36 births

Mental Health Service—Mexborough Urban District, 1952.

Training—2 children attending Doncaster Occupation Centre.

4 adults receiving home training.

4 attending group training classes.

Institutions and Vacancies—

1 adult was admitted to an Institution.

A vacancy is required for 1 adult.

West Riding Patients—

17 under Statutory Supervision.

5 under Voluntary Supervision.

1 under Guardianship.

Hospital Board Patients—

5 After-care patients.

Mental Health—General.

The past year has seen little change in the progress of this service. The Division is still faced with the same problem, the need for an Occupation Centre or suitable facilities for training purposes.

The appointment of a Home Teacher in October has relieved the situation to some extent, but the position is far from satisfactory.

Another serious difficulty is experienced in obtaining suitable work for patients, and there is a great need for sheltered employment in the Area.

Admissions to Institutions.

There still remains 1 patient residing in your Area who is awaiting Institutional care.

After-Care Service.

The After-Care Service for patients discharged from Mental Hospitals is still growing, but it is still not possible to pay all the attention necessary to these patients.

The following Table sets out the position with regard to patients being supervised under the Mental Health Services in your Area :—

	Div. 30	Mexborough U.D.
1. No. of defectives ascertained during 1952	5 (10)	1 (3)
Total No. of defectives ascertained	135 (139)	24 (25)
2. No. under Guardianship	5 (7)	1 (1)
No. under Statutory Supervision	101 (106)	17 (19)
No. under Voluntary Supervision	23 (25)	5 (5)
No. on licence from Institution	1 (1)	— (—)
3. No. awaiting Institutional Vacancies	15 (18)	1 (4)
No. attending Doncaster Occupation Centre	10 (10)	2 (2)
No. being home trained	11 (5)	4 (2)
No. attending Group Training Classes	24 (—)	4 (—)
Reports made for Regional Hospital Boards (Institutional Patients)	8 (10)	1 (2)
After-care patients (Mental Hospital) under Section 28 of the National Health Service Act	12 (14)	5 (2)
Numbers in brackets are corresponding figures for 1951		

3. Maternity and Child Welfare.

(i) Health Visiting.

At the end of the year there was one qualified Health Visitor and three Assistant Health Visitors employed in your District.

The work of the Health Visitor is essentially to teach, help and advise mothers with regard to the healthy rearing of their children. With this being so, there is, of course, a link up with the General Practitioner in the Area, which is generally good in your District. The one difficulty is that the Health Visitor is mainly concerned with families that are healthy and with keeping them healthy, whereas most of the General Practitioner's work concerns sickness in the family.

The number of visits made to homes by Health Visitors in the Division during the year was 29,845, an increase of over 4,000 visits, compared with 1951. Of this very high total, the Health Visitors of the County Council working in your District carried out 10,190 visits to the homes. I feel that a great deal of the good results that have been obtained this year may well be due to their untiring work.

Quarterly Meetings have been held by me at Mexborough of a Committee whose function is to correlate information regarding children who may be ill-treated or neglected in their own homes. As in other Districts, the Health Visitors from your Area attended, and this was of great help, as the Health Visitor is the only Social Worker who goes into any family not in response to the fact that something has gone wrong, i.e., child sickness, etc.

During the course of their duties, three Health Visitors used cars during 1952.

(ii) Domiciliary Midwives.

At the 31st December, 1952, there were 2 midwives and 1 Relief Midwife employed in your District, and owing to sickness, it was necessary to call in midwives from other Areas to assist in Mexborough.

Nevertheless, over 1,500 Ante-Natal visits were paid to expectant mothers at their homes before the birth of their children, when advice, care and instruction was offered. The main advice centred on adequate diet, and that expectant mothers should take every advantage of the welfare preparations available, i.e. orange juice and vitamin tablets.

Additionally, Midwives paid nearly 2,500 Post-Natal visits.

The impression I get is that the hazards of child birth are maximally in early pregnancy, and other than this, prematurity is the main hazard affecting the child.

I consider that the progress made by Domiciliary Midwives in your Area has been very good.

(iii) Applications for Institutional Confinements.

In the Mexborough Urban District during 1952, 122 applications for institutional confinements were received, and of these, 104 were accepted. Accommodation was obtained for 95 cases at the Montagu Hospital, Mexborough, and others were booked principally at Listerdale Maternity Home, St. Helen Hospital, Barnsley, and the Western Hospital, Balby.

Since 1948 the booking of cases has been on a priority basis in view of the fact that obviously the best use of maternity hospital beds should be made, i.e., the cases in which, for one reason or another, it is thought desirable that confinement should take place in hospital.

The bookings of the 104 cases from your District were classified as follows :—

21 cases—Priority I On account of medical or obstetric reasons.

60 cases—Priority II On account of poor social conditions in the home.

23 cases—Priority III Being expectant mothers about to have their first baby, and also mothers having their 5th and subsequent child.

It is a mirror of the social conditions that about 60% of the mothers having their baby in hospital did so on account of poor social conditions. In the main these social conditions were of a personal nature, mainly caused by overcrowding.

(iv) Gas and Air Analgesia.

During the year 106 expectant mothers having domiciliary confinements in your District have received Gas and Air Analgesia out of a total number of 163 domiciliary confinements, i.e. 65%.

The figure in the whole of the Division is 63%, for the year, and I should be very happy to know that there had been more Gas and Air Analgesia given at confinements in the home.

Supplies of Pethidine Hydrochloride have been made available to Midwives for use by injection at confinements, and supplies have been issued by myself under the Regulations governing dangerous drugs.

(v) Care of the Premature Infant.

One hundred premature infants were born in the Division in 1952. Eighty-seven were living at birth and 13 were still births. Fifteen of the live births subsequently died, giving an average survival rate of 83%.

Fifteen premature babies were born in the domiciliary practice of Midwives in your District during the year, and of these babies 3 died.

The average weight of these babies at birth was 4 lbs. 7½ ozs., and the surviving babies had an average weight at birth of 4 lbs. 11 ozs.

In one case it was necessary to make arrangements for a Sorrento Premature Baby Cot to be delivered by ambulance to the home of an expectant mother who went into premature labour. The warmed cot was then available to receive the low-weight baby at the moment of birth.

The equipment accompanying the cot includes special feeder, baby clothes, hot water bottles, oxygen cylinders and a humidifier.

The Table below gives details of the number of days this baby was nursed in the cot, and the number of visits paid by the Domiciliary Midwife during that period :

Locality	Date of Birth	Birth Weight	No. of Nursing Visits	Days Nursed in Cot	Survived
Mexborough	20/11/52	5 lbs.	22	28	Yes

4. Vaccination and Immunisation.

Facilities for the immunisation of children against Diphtheria are available at the Child Welfare Centre on Tuesday afternoons between 2.00 p.m. and 4.00 p.m.

In addition, immunisation against Diphtheria and vaccination against Smallpox can be carried out by each Family Doctor in the District.

In response to the immunisation scheme in schools it will be seen that over 72% of schoolchildren are protected against Diphtheria in your District.

The point that is important, however, is that of the estimated 1,385 infants under 5 years of age, there are only 661 protected, i.e. less than 50%.

Again, it cannot be too strongly emphasised that the correct age for parents to have their children immunised is about eight months, and I expect that all children should be protected by their first birthday.

It causes anxiety to me to know that there are 700 children in your District under school age who have not been protected, and that these children are as open to the dangers of a diphtheria epidemic as children in the years before the war, when the toll of this disease was estimated at 3 deaths of children in the year 1938. Diphtheria still kills.

In addition to these facilities for immunisation against Diphtheria, a scheme has been approved and put into operation on the District, whereby should the parents require it, immunisation of children against Whooping Cough may be undertaken. Until full advantage has been taken of the facilities for protecting children against Diphtheria, I feel that the cart, as it were, is being put before the horse.

With regard to protection of children by vaccination against Smallpox, it is interesting to know that only 7 children under one year of age received primary protection.

If primary protection does not take place in infancy and the child grows to adolescence and then requires vaccination for the first time, say in the Armed Services for a boy or as a Nurse for a girl, then there is a possibility—though fairly remote—of fatal complications ensuing. These complications never seem to follow primary vaccination in infancy. In addition, with fast air travel and the difficulties at present encompassing us in the West Riding of Yorkshire, it is obviously safer to have more children given the benefits of primary vaccination in infancy.

5. Section 28 Prevention of Illness—Care and After Care. Hospital After-Care.

Miss W. J. Bailey, the Health Visitor of this Division who has been given the task of arranging hospital after-care of cases discharged from the Montagu Hospital, Mexborough, reports to me that the after-care work from the Montagu Hospital during 1952 has been maintained.

Background reports of the socio-medical conditions in the homes of patients, requested by the hospital authorities, numbered 283, of which 266 Forms were completed and returned to the hospital.

During their stay in hospital, 153 patients were interviewed, whilst 193 patients were given assistance after leaving hospital during the year.

This after-care is a most satisfactory part of the Health Visitors' work and it has thus been possible to obtain information regarding infants under one year of age, and school-children, and to assist greatly in the care and supervision in the home of elderly persons who have recently been sick.

In all instances, information regarding the discharge of the patient from hospital and the action requested has been forwarded to the family doctor concerned.

The main assistance to patients discharged from hospital is in the form of advice and help given by Health Visitors (150 cases) whereas in some instances, the assistance of the Home Nurse has been requested (39 cases) and also home help has been arranged (4 cases).

I feel that by this method of after-care, the maximum value of hospital treatment has been maintained by Public Health Nurses visiting and seeing the cases actually in the home.

STATISTICS RELATING TO DIPHTHERIA IMMUNISATION AND VACCINATION

FOR YEAR ENDED 31st DECEMBER, 1952.

DIPHTHERIA IMMUNISATION

Urban District	No. of Children Immunised in 1952			Booster Doses in 1952	No. of Children Immunised at any time up to 31/12/52			Estimated mid-year population in 1952			Percentage Rate		
	under 5 yrs.	5-14 years	Total		under 5 yrs.	5-14 years	Total	under 5 yrs.	5-14 years	Total	under 5 yrs.	5-14 years	Total
Mexborough U.D.	128	85	213	222	661	2521	3182	1385	3467	4852	47.7	72.7	65.6

VACCINATION, 1952.

Mexborough U.D.	Under 1 yr. 1952	1-4 years	5-14 years	15 years and over	Total
Primary	7	3	2	24	36
Re-Vaccination	1	—	—	19	20

6. Section 47 National Assistance Act, 1948.

During the year no reports were made by me to the Council under this Section.

7. Cases receiving Home Help in the Mexborough Urban District, 1952.

During the year 134 families in your District received domestic help, whilst in the preceding year there was a total of 125 cases, and in 1950 a total of 122. These cases were made up as follows :—

	1952	1951	1950
Illness	21	23	31
Tuberculosis	9	7	1
Lying-in	31	30	37
Expectant Mothers	10	6	7
Aged Sick	45	39	26
Aged Infirm	15	17	16
Care of children of school age ...	3	3	4
	<hr/> 134 <hr/>	<hr/> 125 <hr/>	<hr/> 122 <hr/>

As can be seen from the comparative figures for the previous two years, there has been a great increase in the provision of domestic help in the homes of aged sick persons, to such an extent that it is doubtful whether adequate care and attention could be given, under the circumstances, to these persons by any other means.

With 11% of the population of your District aged, i.e., women over 60 and men over 65, I foresee a further increase in the number of aged persons who are to be helped in the future by the provision of domestic help.

During the year the total number of families in which domestic help was provided in this Division decreased from 343 to 337, although the number of hours of work by domestic helps has increased.

The main difficulty with regard to the day to day administration of the Home Help Service is an assessment of the help forthcoming from relatives and friends of these aged persons.

8. School Health Service.

Dr. B. R. A. Demaine has made the following observations on the School Health Service :—

“The work of the School Medical Service has been carried out throughout 1952 making its contribution to the health of the school population. Routine Medical Inspections have been made in the three groups :—

1. Entrants.
2. Junior Leavers.
3. Senior Leavers going forward to Juvenile Employment.

Periodic inspections have also been carried out on

1. Pre-nursing candidates for entrance to the Technical College.
2. Children requiring a general anaesthetic for Dental Treatment.
3. Children prior to holidays in Camp.
4. College Entrants.

School clinics are held fortnightly at Mexborough where special cases are referred by parents and Head Teachers. Regular contact can thus be made with parents and children who require extra supervision.

A Paediatric Clinic is held each month at the Mexborough Clinic, and the opportunity of personal contact with the County Paediatrician, Dr. Harvey is invaluable to parents and County Staff. The co-operation of the General Practitioners is growing, enabling both treatment and research work to be accomplished.

Visits to the Sheffield Children's Hospital are made from time to time, forming a valuable liaison between the hospital and public health staff, and so linking the clinical with the administrative work.

During the summer of 1952, the first survey of the heights and weights of school children was carried out. It was found that there was no appreciable difference between the heights, weights and height weight dispersion of children in Division 30, and those for the national average, and the figures for the Senior Girls were very slightly above average.

Cleanliness.—The incidence of verminous heads is still a matter of concern, and the wastage of school time in attending clinics is considerable. Several cases have been excluded, and this step has been followed with improvement in many cases.

An Ultra Violet Ray Clinic in Mexborough has two sessions weekly, with a doctor in attendance one morning a week. Forty children are on the treatment list at one time, and there is also a waiting list. The popularity of this Clinic has grown, and parents have expressed their appreciation of the general improvement in health and well-being which has resulted from a course.

E.N.T—The Situation is much improved, and all cases referred from school have been examined, although the waiting list for operative treatment is still long.

Defective Vision.—The waiting time between School Inspections and examination by the School Oculist has been greatly reduced. Unfortunately several children having obtained a prescription and glasses, require to be strictly supervised by their teachers to get full benefit of this service.

Immunisation.—From April to July an intensive campaign was carried out with Diphtheria Immunisation. Refresher doses were given to the 5 year and 9 year groups, and protective courses to school entrants who had not been protected during infancy.

Physically Handicapped Children find placement in Special Schools more quickly than a few years ago, but unfortunately the same cannot be said of the Mentally Handicapped.

Maladjusted Children have been placed in hostels and made satisfactory progress. Most parents have co-operated well on the whole, but it is still difficult to get the family prepared for the child's eventual return.

The major problems are the children who are incapable of fitting into school routine. These distract the teacher and other children, and prevent the class work being carried out. Parents naturally dislike Certification, and although this is frequently the obvious course to take it is small comfort for them to find that the child is excluded from ordinary school, with no hope of admission to an Occupation Centre. These children can only run wild and get into trouble and become delinquents in later life.

Our acquisition of a Home Teacher has brought a welcome interlude into the lives of the more severely handicapped, and what is equally important, a little respite to harassed parents. Each handicapped child presents a specific problem which has to be faced and solved in relation to the family, the school and the community.

SECTION F.

Prevalence and Control over Infectious and Other Diseases.

(i) Notifiable Diseases other than Tuberculosis.

The following Tables show that during the year ended 31st December, 1952, Measles, Whooping Cough and Pneumonia constituted the largest numbers of notifications of infectious diseases received by me from General Practitioners in your District.

There was, however, no widespread outbreak of diseases during the year.

There were no deaths from Whooping Cough during 1952, and the diminution in the number of cases of Scarlet Fever continued.

In 1951 and 1950 the total number of notifications of Scarlet Fever were 20 and 39 respectively.

One case of Diphtheria was notified, but this was later re-diagnosed as Streptococcal Rhinitis. The absence of deaths from Diphtheria, although encouraging, is I feel inclined to make parents apathetic, and I would again stress the importance of ensuring that each child is immunised against Diphtheria, preferably by the eighth month of the baby's life.

One case of Acute Poliomyelitis was confirmed, but this was non-paralytic, and the child suffered no serious after-effects.

Notifications of Pneumonia in your Area are still above the average for the country, and it will be seen that 39 cases were notified during the year. There were, however, 3 fewer deaths from this disease than were reported during 1951.

Of the 13 cases of Dysentery notified, only 2 were confirmed as Sonne Dysentery, the others being re-diagnosed as Non-Specific Diarrhoea.

INFECTIOUS DISEASES

Notifiable Diseases (other than Tuberculosis) during 1952
Mexborough.

Disease	Total Cases Notified	Cases after Correction	Cases admitted to Hospital	Deaths.
Measles	54	54	1	—
Whooping Cough	55	55	—	—
Scarlet Fever	6	6	3	—
Diphtheria	(1) 1	—	1	—
Puerperal Pyrexia	1	1	1	—
Cerebro-Spinal Fever	2	2	2	—
Pneumonia	34	34	6	4
Acute Poliomyelitis Non Paralytic	1	1	1	—
Dysentery	(2) 13	2	3	—

(1) Re-diagnosed Streptococcal Rhinitis

(2) Eleven Cases re-diagnosed non-specific Diarrhoea

INFECTIOUS DISEASES (CORRECTED) 1952

Age Distribution—Mexborough.

AGE	Poliomyelitis (Non-Paralytic)	Dysentery	Scarlet Fever	Whooping Cough	Measles	Pneumonia	Cerebro-Spinal Fever	Puerperal Pyrexia
Under 1	—	—	—	11	3	4	—	—
1—3	—	—	—	9	13	5	—	—
3—5	—	—	3	22	12	2	—	—
5—10	1	—	1	11	24	2	—	—
10—15	—	—	1	—	—	—	—	—
15—35	—	1	1	1	2	4	2	1
35—45	—	—	—	1	—	5	—	—
46—65	—	1	—	—	—	8	—	—
65 & over	—	—	—	—	—	4	—	—
Total	1	2	6	55	54	34	2	1

(ii) Tuberculosis.

The same trends which were noted last year have continued during 1952.

A further 22 children who were living in households where there was a known case of Pulmonary Tuberculosis were vaccinated with B.C.G. vaccine. In 14 of these 22 cases, the children were segregated from known sources of infection, and after skin testing, were vaccinated with B.C.G. vaccine, whilst 8 children whose relatives were suffering from Pulmonary Tuberculosis which was non-infectious and quiescent, were not segregated but similarly protected.

In two years there has been a total of 58 children in your District who have been given the added protection of B.C.G. vaccination against contracting Pulmonary Tuberculosis, and I consider this figure to be satisfactory.

During the year, in all, 29 fresh cases of Pulmonary Tuberculosis and 3 fresh cases of Non-Pulmonary Tuberculosis were notified. Seven notifications of Pulmonary Tuberculosis were reported in children under 15 years of age. Contacts were examined from known cases, and as a result 2 new cases were notified in your District.

The number of cases examined as contacts continues to increase, but I consider that there is a large field for far more follow-up than has ever been the case in this District.

I am pleased to report that a further 5 cases were re-housed by your Council during the year, making a total of 45 families re-housed since 1946 where it was known there was tuberculous infection. It is significant that following a survey of these cases, it was found that in only one case had there been a spread of infection.

Sanatorium admissions during 1952 numbered 24, compared with 26 cases admitted in the previous year. Seventeen of the admissions were males and 7 females. The waiting period for adults is lessening, moreso for males than for females, whilst the waiting period for the admission of children is still fairly long.

Home treatment has been carried out in 14 cases in your District during the year, whilst 1 case has received help via the West Riding County Council in the provision of beds and bedding in order that bedroom segregation from other people may be effected.

I am pleased to say that extra nourishment was received by 16 cases in the Mexborough District during the year 1952.

What of the year's work in the prevention of this disease? The main point seems to be that the deaths from this disease have been reduced by a half, compared with 1951.

There has been a slight increase in the number of notified cases at the same time, and this is probably due to the fact that the Mass Miniature Radiography Unit visited your Area in June, when 8 fresh cases of Pulmonary Tuberculosis were notified as a result.

I append below details of the Survey carried out at Mexborough, and would mention that it is considered by those qualified to give judgment, that the attendance and results appear to be average for the District and the type of population :—

	Males	Females	Total
Total radiographed	996	1,383	2,379
Passed on miniature film	922	1,318	2,240
Failed to return for repeat miniature ...	—	—	—
Recalled for full-size film	63	60	123
Failed to return for full-size film	6	1	7
Passed on large film	20	28	48
Recalled for medical interview after large film	37	31	68
Recalled for medical interview without large film	11	5	16
Failed to attend for medical interview ...	1	—	1
Referred to Chest Clinic	20	14	34
Referred to Own Doctor	27	20	47
"No action" cases after interview	—	2	2

To give a reasonable indication of the trend of Tuberculosis cases, I append below an extract from some figures which I have recently been compiling, which show the deaths from Pulmonary Tuberculosis and the new cases notified over a period of 19 years :—

Deaths from Tuberculosis—(Registrar General's Figures)

Year	Mexborough U.D.	
	Pulmonary	Non-Pul.
1951	12	—
1950	9	1
1949	13	—
1948	9	2
1947	5	4
1946	12	1
1945	4	1
1944	15	—
1943	12	2
1942	15	1
1941	14	3
1940	6	2
1939	11	3
1938	6	1
1937	9	—
1936	5	—
1935	4	4
1934	2	2
1933	7	—

Notifications of Tuberculosis (New Cases).

Year	Mexborough U.D.	
	Pulmonary	Non-Pul.
1951	26	1
1950	18	4
1949	29	1
1948	23	2
1947	11	—
1946	20	2
1945	—	—
1944	—	—
1943	—	—
1942	—	—
1941	—	—
1940	—	—
1939	—	—
1938	13	7
1937	—	—
1936	—	—
1935	—	—
1934	11	7
1933	14	6

It is interesting to note that patients are more inclined to have domiciliary treatment than go into Sanatorium, and that domiciliary treatment is being carried out in increasing numbers.

Although there has only been two notified cases discovered through contact tracing, quite a number of contacts nevertheless, are kept under observation at the Clinic.

The co-operation received from patients on the whole is considered to be fairly good during the year, and it is noted that patients always seem to have a fear of other persons knowing of their condition, and they have a dislike of being seen at the local Chest Clinic.

It is interesting to know that it is expected during 1953 that a Chest Clinic will be available in Mexborough with X-ray facilities, and that this should prove a valuable step forward in the control of this disease.

TUBERCULOSIS.

New Cases and Mortality During 1952.

NEW CASES

Age Periods				Pulmonary		Non-Pulmonary	
Years				M	F	M	F
0—1	.....	.....	.....	—	1	—	—
1—5	.....	.....	.....	—	1	—	—
6—15	.....	.....	.....	3	2	1	—
16—25	.....	.....	.....	2	—	—	—
26—35	.....	.....	.....	2	4	—	1
36—45	.....	.....	.....	6	1	—	—
46—55	.....	.....	.....	4	1	—	1
56—65	.....	.....	.....	—	2	—	—
66 and over	.....	.....	.....	—	—	—	—
TOTALS				17	12	1	2

DEATHS

Age Periods				Pulmonary		Non-Pulmonary	
Years				M	F	M	F
0—1	.....	.....	.....	—	—	—	—
1—5	.....	.....	.....	—	—	—	—
6—15	.....	.....	.....	—	—	—	—
16—25	.....	.....	.....	—	—	—	—
26—35	.....	.....	.....	2	1	—	—
36—45	.....	.....	.....	1	—	—	—
46—55	.....	.....	.....	—	—	—	—
56—65	.....	.....	.....	1	—	—	—
66 and over	.....	.....	.....	1	—	—	—
TOTALS				5	1	—	—

MEXBOROUGH URBAN DISTRICT COUNCIL
ANNUAL REPORT OF
THE CHIEF SANITARY INSPECTOR
FOR THE YEAR ENDING 31st DECEMBER, 1952.

To the Chairman and Members of the
Mexborough Urban District Council.

Mr. Chairman, Lady and Gentlemen,

I beg to present my Annual Report on the work of the Department for the year ending December, 1952.

Sanitary Circumstances of the Area.

The shortage of land for building purposes was still one of the major problems of the district and to continue with the housing programme it was being found necessary to build up available open spaces in the town, thus diminishing the air space to existing property and increasing the number of houses per acre. The number of new houses completed during the year was 41 making a total of 5,241 in a compact area of 1,452 acres. The Registrar General's mid 1952 estimate of resident population was 19,230 which shows an increase of some 500 persons over the previous year, of which a figure of 130 is accounted for by a majority of births over deaths. The area is thus becoming more overcrowded, with an average of approximately 13·23 persons per acre overall. In spite of the Council's continued housing programme, the rate of building is far in excess of that of removal of sub-standard property so that saturation point will soon be reached when the area will offer no land for building purposes. It is my opinion that soon Re-Development Areas will have to be considered and blocks of old sub-standard property removed and replaced by new modern houses. Little progress was made in the matter of increasing boundaries of the Urban District, although negotiation still went on. It is my opinion again that with the overcrowding of this area Socio-Medical problems may increase.

Water Supply.

The Council continued to obtain water from the borehole at the water works in Pitt Street, and the Ludwell Springs, situated at High Melton. The rainfall for the year was 5·9 inches below that of 1951 and it was found that the supply of

water from the borehole and springs was not as plentiful as in previous years, and it was found necessary to restrict the supply during the night during the latter part of the year. Over recent years it would appear that the yield of water was gradually diminishing. Assistance was obtained from the Doncaster and Tickhill Water Board on occasions. 34 samples were taken for Bacteriological and 1 for Chemical examination, and all these were found to be satisfactory.

Sewage Disposal.

The treatment of sewage continued at the works adjoining the Pastures Road and no complaints were received from the West Riding Rivers Board as to the final effluent. Flooding occurred in some areas of the town at periods of heavy rain owing to supercharging of the sewers and the scheme for the laying of a new Surface Water Sewer was contemplated and adopted to relieve an already overloaded sewage system.

Sanitary Inspections of the District.

Nature of Inspection										No. of Inspections
Factories	...	...	...	...	...	...	...	...	...	111
Bakehouses	...	...	...	...	...	...	...	...	...	12
Drainage	...	...	...	...	...	...	...	...	...	67
Offensive Trades	...	...	...	...	...	...	...	...	...	37
Common Lodging House	...	...	...	...	...	...	...	...	...	12
Temporary Dwellings	...	...	...	...	...	...	...	...	...	9
Rats and Mice	...	...	...	...	...	...	...	...	...	714
Shops	...	...	...	...	...	...	...	...	...	177
Infectious Diseases	...	...	...	...	...	...	...	...	...	37
Houses	...	...	...	...	...	...	...	...	...	1,498
Slaughter Houses	...	...	...	...	...	...	...	...	...	82
Ice Cream Premises	...	...	...	...	...	...	...	...	...	84
Restaurants and Cafes	...	...	...	...	...	...	...	...	...	67
Other Food Premises	...	...	...	...	...	...	...	...	...	187
Cowsheds, Dairies and Milk Shops	...	...	...	...	...	...	...	...	...	43
Smoke Inspections	...	...	...	...	...	...	...	...	...	12
Miscellaneous	...	...	...	...	...	...	...	...	...	65
Vermin Infestations	...	...	...	...	...	...	...	...	...	152
										<hr/> 3,366 <hr/>

Complaints.

372 complaints were received during the year and were all given attention. This again shows a decrease in the number of complaints received compared with the previous year's figure. Most of the complaints were regarding sub-standard property and one reason for the reduction of complaints may be due to the fact that many people were buying sub-standard property for their own occupation after the Council had re-housed the previous tenants. Owing to the lack of accommodation many sub-standard homes were sold at exorbitant prices. At the end of the year 17 complaints were outstanding.

Housing.

Housing work again constituted the major problem and particular attention was given to the large number of sub-standard properties in the district. Some of these were fast falling into dilapidation, and it was found that the elderly owners were not in a financial position to carry out the whole of their obligations. It was only found possible to take action under Section 11 of the Housing Act, 1936 in respect of two houses and these were finally demolished. Some owners were asking the Council to demolish their houses but the problem is that of rehousing the tenants. It is hoped that some programme of Slum Clearance may be put into operation in the near future, and it may be that some Re-development Schemes may be launched. It is estimated that there are some 300 houses in the district which should become subject to Clearance Orders, but it would appear that these houses are likely to stand for some few years yet. It was found during the year in question that several sub-standard houses had been sold to owner occupiers for fabulous sums, in many cases in spite of advice from the Department. Shortage of accommodation is so acute that there is always a buyer for any type of property.

A total number of 567 houses was inspected during the year and 1,498 inspections made for the purpose. 392 houses were rendered fit in consequence of informal action, and 90 houses were repaired after the service of Statutory Notices under the Public Health Act, 1936. In 4 cases legal proceedings were instituted and nuisance orders obtained. In 4 other cases work was carried out by the Local Authority in default of the owners.

List of Notices Served.

Section 39 Public Health Act 1936	...	...	9
„ 45 „ „ „ „	...	...	9
„ 93 „ „ „ „	...	...	65
„ 56 „ „ „ „	...	...	3
„ 89 „ „ „ „	...	...	1
„ 138 „ „ „ „	...	...	1
Section 11, Housing Act 1936	...	...	2

A total of 1,249 repairs were carried out to 490 houses.

Defects remedied are listed below:—

Chimneys repaired	...	78	Damp wall remedied	...	92
Eaves Gutters renewed	118		Doors repaired	...	35
New sinks	...	14	Waste pipes renewed	...	18
Roofs repaired	...	143	Defective walls repaired	11	
Windows repaired	...	61	Steps repaired	...	2
Handrails provided	...	4	Plaster renewed	...	119
Sink linings renewed	...	1	Coppers renewed	...	23
Range repairs	...	89	Firebacks renewed	...	9
Floors repaired	...	57	Water in cellars remedied	32	
Choked drains released	115		Drains reconstructed	...	2
New gullies	...	1	Gullies reconstructed	...	1
Smoke nuisances abated	31		Ventilation	...	1
Yard paving	...	16	Defective rain water		
W.C.'s repaired	...	68	pipes renewed	...	67
			New pails	...	2
New W.C.'s	...	6	Offensive Accumulation	1	
			Miscellaneous	...	32

TOTAL:— 1,249

Total of houses inspected for defects	...	...	567
Total defects found	...	...	1,317
Total defects remedied	...	...	1,249
Number of houses in district	...	...	4,231

Overcrowding.

There has been no time to carry out any over-crowding survey but the general picture seems to be that overcrowding is still decreasing. This I think is largely due as in previous years to the Council's house letting scheme.

Tents, Vans, Sheds.

There were no temporary dwellings in the district during the year and the only caravans were those of travelling gypsies who stayed a few days at a time on the Pastures Road.

Common Lodging House.

There was no nuisance caused at the Common Lodging House, Lees Buildings, and the house was nowhere overcrowded at any time. The majority of inmates appear to be elderly male persons, though occasionally young men take up residence there for short periods. Lime washing of the premises was carried out satisfactorily, and 12 inspections were made.

Dirty and Verminous Premises.

No serious case of dirty or bug infested premises was found, and apart from isolated cases of small bug infestations in a few sub-standard houses, bugs were almost unknown. The decrease in the bug population has been steady since the end of the war and this I think can be put down to the wider use of D.D.T. insecticides, education in personal hygiene and frequent inspection of doubtful tenants. The Council made a ruling that no person should move into a Council owned house unless the house had been previously inspected and certified clean and free from vermin. In only two cases was it found necessary to issue any adverse report and these families were placed six months behind on the housing list. Constant supervision of families in Council houses was maintained, and several of the doubtful families removed themselves out of the District. The worst cases were interviewed by the Council and improvements took place

By far the largest infestations were those by cockroaches and much time was devoted to this subject. Various types of D.D.T. insecticides were used but to ensure success the process appears lengthy and the co-operation of the tenant is absolutely necessary

Joint inspections of some premises were carried out with Inspector Preston of the N.S.P.C.C. and afterwards with his successor Inspector Flory. General conditions improved and

it was not necessary for any legal action to be taken. It was always found that the N.S.P.C.C. officers were always willing to co-operate with your Council's officers.

Number of Verminous Premises Treated.

Bug infested properties	...	...	...	21
Ant infested	„	...	...	2
Cockroach infestations	...	...	...	35
Silver-fish	„	...	...	3
Slug	„	...	...	3
Red mite	„	...	...	1
Flea	„	...	...	1
Blowfly	„	...	...	2
Carpet Moth	„	...	...	1
Wasp	„	...	...	1
				<hr/> 70 <hr/>

Squatters.

There were only two families squatting during 1952 and these were both in old condemned houses. One of these houses was the subject of an undertaking from the owner not to relet the premises for human habitation and again I must point out the danger of accepting undertakings under Section 11 Housing Act, 1936.

The three Welfare Huts in the Top Market Place were showing signs of deterioration and many first aid repairs had to be carried out.

Rodent Control.

The Council continued to employ a full time Rodent Operator and the value of this service is now very much apparent as since the war the rodent population has definitely decreased, and in fact there was only one major infestation found during the year. Frequent supervision was given to the Council owned properties, for example, the Sewage Works and the Refuse Tips. and two 10% tests of the sewers were carried out. These showed practically no infestations in the sewers and this may be put down as an advantage given by the sewers becoming supercharged at the times of heavy rainfall.

Several small infestations of mice were found and particular attention was given to the food-shop premises.

It would now appear that the public has become "rodent minded" and the presence of a rat or suspected rat is quickly

brought to the notice of the Department. In fact many inspections were made where no evidence of rats could be found.

Generally it was found that the public and shop keepers were very co-operative and it was not found necessary to serve Notices during the year.

Premises inspected	...	...	...	...	...	565
Number of rat infested premises and treated						100
Number of baiting points	...	...	...			1,264
Pre-baits laid	...	...	...	...	...	3,792
Post-baits showing infestation clear	...					112
Rat bodies recovered	...	...	...	...		297
Mice-infested Premises	...	...	...	...		18
Number treated	...	...	...	...	...	18
Mice bodies recovered	...	...	...	...		202

Atmospheric Pollution.

Eight lead peroxide instruments and one deposit gauge were in operation during the year and monthly readings were taken, a copy of which was sent to the Department of Scientific Research.

It was noted that the centre of highest Sulphur Dioxide pollution was shifting from the east end to the centre of the town. This may be due in one respect to the greater dispersal of SO_2 from the Power Station chimneys at the east end or, more likely, due to pollution from the domestic flue. The coal fire in my opinion is a far greater nuisance than is realized, and though new type heating appliances are being installed in new houses, there are still many thousands of unsuitable ranges in the older properties.

The deposit gauge readings were about the average for any area of this nature and, of course, these vary with the winds in the district.

There were very few complaints regarding smoke nuisances. These were remedied by service of Notices.

The greatest pollution danger, in my opinion, are the chimneys of the Denaby Colliery, which are situated just outside the Urban District boundary. These chimneys continually pour out dense volumes of black smoke, particularly in the afternoons. Another likely danger to the District may be the new coking plant to be erected in the near future at Manvers Main Colliery, but this again is situated outside the Urban Area.

It was found on several occasions that one of the Lead Peroxide instruments had been interfered with by members of the public and the instrument was damaged beyond repair.

The lead peroxide instruments and deposit gauge readings are enclosed.

SULPHUR GAUGE READINGS — 1952.

Wt. Ba SO₄.

Period	Station	Area Exposed in Sq. Cm.	In Sample (Mg)	In Control (Mg)	Due to Exposure (Mg)	Wt of SO ₃ collected Mg/100 a.Q.cm/ day
Jan. 1952	Bailey	100 · 0	328 · 0	23 · 0	305 · 0	3 · 38
	Denaby	101 · 0	202 · 0	23 · 0	179 · 0	1 · 96
	Hanby	102 · 0	219 · 0	23 · 0	196 · 0	2 · 13
	Market Hall	96 · 0	343 · 5	23 · 0	320 · 5	3 · 69
	Sewage Farm	101 · 0	363 · 5	23 · 0	240 · 5	3 · 73
	Water Tower	100 · 0	364 · 0	23 · 0	341 · 0	3 · 78
	1st Y.E.P.	101 · 0	242 · 0	23 · 0	219 · 0	2 · 40
	2nd Y.E.P.	99 · 0	309 · 0	23 · 0	286 · 0	3 · 20
Feb. 1952	Bailey	100 · 0	264 · 0	6 · 0	258 · 0	3 · 06
	Denaby	101 · 0	200 · 0	6 · 0	194 · 0	2 · 27
	Hanby	99 · 0	188 · 5	6 · 0	182 · 5	2 · 18
	Market Hall	99 · 0	277 · 0	6 · 0	271 · 0	3 · 24
	Sewage Farm	99 · 0	243 · 5	6 · 0	237 · 5	2 · 84
	Water Tower	102 · 0	272 · 0	6 · 0	266 · 0	3 · 09
	1st. Y.E.P.	102 · 0	212 · 0	6 · 0	206 · 0	2 · 39
	2nd Y.E.P.	99 · 0	229 · 0	6 · 0	223 · 0	2 · 67
March 1952	Bailey	99 · 0	146 · 0	15 · 0	131 · 0	1 · 47
	Denaby					
	Hanby	101 · 0	115 · 0	15 · 0	100 · 0	1 · 10
	Market Hall	101 · 0	166 · 0	15 · 0	151 · 0	1 · 66
	Sewage Farm	101 · 0	113 · 5	15 · 0	98 · 5	1 · 08
	Water Tower	101 · 0	168 · 0	15 · 0	153 · 0	1 · 68
	1st Y.E.P.	102 · 0	106 · 0	15 · 0	91 · 0	0 · 99
	2nd Y.E.P.	100 · 0	111 · 0	15 · 0	96 · 0	1 · 06
April 1952	Bailey	98 · 0	130 · 0	3 · 0	127 · 0	1 · 48
	Denaby					
	Hanby	99 · 0	103 · 0	3 · 0	100 · 0	1 · 16
	Market Hall	102 · 0	163 · 0	3 · 0	160 · 0	1 · 80
	Sewage Farm	98 · 0	136 · 0	3 · 0	133 · 0	1 · 55
	Water Tower	102 · 0	180 · 0	3 · 0	177 · 0	1 · 99
	1st Y.E.P.	98 · 0	141 · 0	3 · 0	138 · 0	1 · 61
	2nd Y.E.P.	101 · 0	136 · 0	3 · 0	133 · 0	1 · 51
May 1952	Bailey	101 · 0	126 · 0	6 · 0	120 · 0	1 · 36
	Denaby	100 · 0	86 · 0	6 · 0	80 · 0	0 · 92
	Hanby	97 · 0	87 · 0	6 · 0	81 · 0	0 · 96
	Market Hall	97 · 0	131 · 0	6 · 0	125 · 0	1 · 47
	Sewage Farm	100 · 0	119 · 0	6 · 0	113 · 0	1 · 29
	Water Tower	98 · 0	149 · 0	6 · 0	143 · 0	1 · 67
	1st Y.E.P.	100 · 0	112 · 0	6 · 0	106 · 0	1 · 21
	2nd Y.E.P.	96 · 0	122 · 0	6 · 0	116 · 0	1 · 38
June 1952	Bailey	95 · 0	119 · 0	5 · 0	115 · 0	1 · 23
	Denaby	96 · 0	83 · 0	5 · 0	78 · 0	0 · 90
	Hanby	95 · 0	95 · 0	5 · 0	90 · 0	1 · 05
	Market Hall	96 · 0	125 · 0	5 · 0	120 · 0	1 · 38
	Sewage Farm	95 · 0	100 · 0	5 · 0	95 · 0	1 · 11
	Water Tower	98 · 0	133 · 0	5 · 0	128 · 0	1 · 45
	1st Y.E.P.	98 · 0	107 · 0	5 · 0	102 · 0	1 · 14
	2nd Y.E.P.	98 · 0	109 · 0	5 · 0	104 · 0	1 · 18

SULPHUR GAUGE READINGS — 1952 (Cont.)

Wt. Ba SO₄.

Period	Station	Area Exposed in Sq. Cm.	In Sample (Mg)	In Control (Mg)	Due to Exposure (Mg)	Wt of SO ₃ collected Mg/100 a.Q.cm/day
July 1952	Bailey	96·0	100·0	3·0	97·0	1·12
	Denaby	95·0	77·0	3·0	74·0	0·86
	Hanby	100·0	90·0	3·0	87·0	0·96
	Market Hall	99·0	133·0	3·0	130·0	1·45
	Sewage Farm	97·0	103·0	3·0	100·0	1·14
	Water Tower	99·0	149·0	3·0	146·0	1·63
	1st Y.E.P.	99·0	97·0	3·0	94·0	1·05
Aug. 1952	2nd Y.E.P.	98·0	104·0	3·0	101·0	1·14
	Bailey	98·0	102·0	9·0	93·0	1·05
	Denaby	97·0	69·0	9·0	60·0	0·69
	Hanby	99·0	77·0	9·0	68·0	1·76
	Market Hall	98·0	147·0	9·0	138·0	1·56
	Sewage Farm	100·0	111·0	9·0	102·0	1·13
	Water Tower	99·0	127·0	9·0	118·0	1·32
Sept. 1952	1st Y.E.P.	99·0	95·0	9·0	86·0	0·96
	2nd Y.E.P.		NO RETURN			
	Bailey	98·0	126·0	13·0	113·0	1·32
	Denaby	99·0	73·0	13·0	60·0	0·69
	Hanby	98·0	95·0	13·0	82·0	0·96
	Market Hall	99·0	341·0	13·0	328·0	3·79
	Sewage Farm	101·0	115·0	13·0	102·0	1·16
Oct. 1952	Water Tower	100·0	160·0	13·0	147·0	1·68
	1st Y.E.P.	98·0	97·0	13·0	84·0	0·98
	2nd Y.E.P.	100·0	113·0	13·0	100·0	1·14
	Bailey	95·0	144·0	6·0	138·0	1·61
	Denaby	97·0	90·0	6·0	84·0	0·96
	Hanby	96·0	96·0	6·0	90·0	1·04
	Market Hall	96·0	132·0	6·0	126·0	1·55
Nov. 1952	Sewage Farm	96·0	173·0	6·0	167·0	1·93
	Water Tower	95·0	205·0	6·0	199·0	2·32
	1st Y.E.P.	98·0	154·0	6·0	148·0	1·67
	2nd Y.E.P.	99·0	161·0	6·0	155·0	1·73
	Bailey	96·0	237·0	10·0	227·0	2·62
	Denaby	100·0	162·0	10·0	152·0	1·68
	Hanby	98·0	189·0	10·0	179·0	2·02
Dec. 1952	Market Hall	98·0	388·5	10·0	378·5	4·28
	Sewage Farm	98·0	201·0	10·0	191·0	2·16
	Water Tower	98·0	199·0	10·0	189·0	2·14
	1st Y.E.P.	97·0	187·0	10·0	177·0	2·02
	2nd Y.E.P.	97·0	230·0	10·0	220·0	2·51
	Bailey	96·0	191·0	4·0	187·0	2·23
	Denaby	94·0	123·0	4·0	119·0	1·45
	Hanby	94·0	131·0	4·0	127·0	1·55
	Market Hall	100·0	216·0	4·0	212·0	2·43
	Sewage Farm	96·0	168·0	4·0	164·0	1·96
	Water Tower	96·0	214·0	4·0	210·0	2·50
	1st Y.E.P.	95·0	160·0	4·0	156·0	1·88
	2nd Y.E.P.	99·0	201·0	4·0	197·0	2·28

DEPOSIT GAUGE READINGS - PERIOD JANUARY - DECEMBER, 1952

Site of Gauge — In front of the Urban District Council Offices, corner of Adwick Road and Doncaster Road, Mexborough.

Gauge Number — D. 326.

Metric Factor — (g. deposit to g/100 mi. 2). 1302.

British Factor — (g. deposit to tons/mi.2) 33.19.

Analysis of Matter Collected in Atmospheric Deposit Gauge per Calendar month													
		Jan.	Feb.	March	April	May	June	July	Aug.	Sept.	Oct.	Nov.	Dec.
WATER	m.m. rain	46.0	9.0	29.0	23.0	46.0	31.0	61.0	23.0	45.0	82.0	33.0	35.0
pH Value		4.1	4.1	4.8	5.1	5.7	5.0	5.9	5.8	5.9	4.4	4.1	4.2
TOTAL WATER---	tons per												
INSOLUBLE MATTER	sq. mile	4.48	4.48	7.76	8.60	11.28	7.04	8.60	4.81	9.23	7.20	4.41	7.77
Soluble in CS ₂	"	0.10	0.10	0.20	0.23	0.16	0.10	0.07	0.13	0.17	0.07	0.01	0.20
Ash	"	2.85	2.85	5.04	5.68	7.50	5.11	5.61	3.32	6.41	5.01	2.72	4.95
Other Combustible Matter.....	"	1.53	1.53	2.52	2.69	3.62	1.83	2.92	1.36	2.65	2.12	1.59	2.62
TOTAL WATER SOLUBLE MATTER	"	7.14	3.39	5.41	4.78	5.34	3.82	5.87	3.05	6.80	8.40	7.43	6.51
Ca++	"	0.40	0.37	0.60	0.60	0.80	0.29	0.66	0.46	0.53	0.50	0.56	0.53
Cl'	"	1.69	0.73	0.96	0.96	1.06	0.73	0.86	0.63	1.26	1.63	1.33	1.61
SO ₄	"	2.69	1.19	1.86	2.16	2.66	1.83	2.66	1.63	3.19	3.45	2.49	2.52
TOTAL SOLIDS	tons per sq. mile	10.52	7.87	13.18	13.38	16.63	10.85	14.47	7.87	16.03	15.60	11.85	14.27

Food Inspection.

The meat supply, as in the past years, was supplied from the Doncaster abattoir and no use was made of the private slaughter houses in the town. Some of these are falling into dilapidation and one wonders sometimes what the future of the meat supply is going to be. It is assumed of course that centralized slaughtering is here to stay, but if this was not so then the local slaughter houses would need quite a lot of reconditioning. The system of handling the meat I think improved slightly but there is still room for improvement.

It was again found that the owners of cottagers' pigs were still content to have their animals slaughtered and consumed without Post Mortem inspection. The many dangers of this cannot be over emphasized and the local Food Executive Officer advised the licensees to notify slaughter to this Department. The response was very poor and was only a small fraction of the total number of licenses issued. Again I have to report that the slaughter of pigs on allotment gardens, in my opinion, is very unsatisfactory, and often meat which is to be used for human consumption is left hanging in dirty muddy allotment huts. This seems to be ironic as the retailer of food stuffs has now to show the utmost cleanliness in the handling of his food stuffs, while the individual consumer can please himself.

The Clean Food Campaign was continued throughout the year and although there was no special drive, informal chats with food retailers produced some good results. The standard of food handling was quite satisfactory on the whole, and co-operation was readily given by the retailers and wholesalers. A supply of hot water was provided in two further premises and no food shop was known to exist without a supply of hot water. Particular attention was paid to the personal cleanliness of staffs and no case of food poisoning attributed to any local food store occurred. Inspections were carried out at the Meat Receiving Depot and weekly visits paid to wholesale and retail shop premises. It was again found as in previous years that there was a large number of imported canned food stuffs unfit for human consumption.

The following amount of food stuffs was found unfit for human consumption and destroyed:—

CONDEMNED FOOD — 1952.

Cooked Ham : 60 tins; 3 cwts.

Steak : 55 tins; 9½ lbs.

Pork : 57 tins; 7 lbs.

Jellied Pork : 2 tins; 14 lbs.

Veal and Ham Loaf : 20 tins

Lunch Tongue : 3 tins

Pork Sausages : 41½ lbs.

Pigs : 1

Poultry : 32; 174 lbs.

Cod Fillet : 55 Stone

Salmon : 12 tins

Sild : 36 tins

Rock Lobster : 2 tins

All Bran : 1 pkt.

Rice Toasties : 1 pkt.

Farinoca : 50 lbs.

Sago : 86 lbs.

Macaroni : 4 pkts.

Shredded Wheat : 2 pkts.

Quaker Oats : 23 pkts.

Madeira Cake : 14 lbs.

Golden Cakes : 12.

Raspberry Cream Rolls : 70

Damsons : 6 tins

Pears : 29 jars; 4 tins

Apples : 41 tins

Apple Juice : 2 bottles

Apricots : 25 jars; 2 tins

Grapefruit : 5 tins

Greengages : 5 tins

Plums : 59 tins

Prunes : 51 tins; 49 lbs.

Grapes : 52 tins

Bilberries : 8 jars; 6 tins

Apricot Pulp : 4 tins

Jellied Veal : 9½ lbs.; 55 tins

Luncheon Meat : 182 tins; 10 lbs.

Pork Butts : 16 tins

Minced Beef Loaf : 5 tins

Pork Brawn : 6 tins

Braised Kidneys : 4 tins

Beef Sausages : 31 lbs.

Rabbits : 60 lbs.

Bream : 10 stone

Haddock : 4 stone

Sardines : 16 tins

Brisling : 46 tins

Cape Fish : 3 tins

Oats : 2 lbs.

Flour : 129 lbs.

Semolina : 56 lbs.

Spaghetti : 40 tins

Tapioca : 28 lbs.

Ground Rice : 6 lbs.

Corn Flakes : 35 pkts.

Swiss Rolls : 37

Choc. Layer Cakes : 2

Sandwich Cake : 18 lbs.

Pineapple : 13 jars; 34 tins

Peaches : 12 jars; 4 tins

Sieved Apple : 20 tins

Peach Pulp : 5 tins

Rhubarb : 4 tins

Strawberries : 13 tins

Cherries : 1,172 tins

Fruit Salad : 2 tins

Oranges : 79 tins

Gooseberries : 1 jar; 1 tin

Blackberries : 2 tins

Lemon Squash : 1 bottle

Orange Squash : 1 bottle	Apple Pudding : 1 tin
Dates : 1 pkt.	Bacon : 11 lbs.
Cheese : 111½ lbs.; 3 boxes	Cream Cheeses : 4
Small Pies : 31	Glaze Cherries : 23½ lbs.
Jam : 19 jars; 3 tins	Mincemeat : 1 tin; 11 jars
Lemon Cheese : 23 tins; 7 jars	Marmalade : 9 jars; 54 lbs.
Beans : 124 tins	Tomatoes : 977 tins
Peas : 50 tins	Carrots : 6 tins
Tomato Puree : 10 tins	Soups : 7 tins
Chicken Noodle Soup : 47 pkts.	Milk : 75 tins
Butter : 5 lbs.	Lard : 1¾ lbs.
Margarine : 4¾ lbs.	Tea : ½ lb.
Sugar : 11½ lbs.	Pickles : 26 jars
Beetroot : 1 jar	Sandwich Spread : 8 jars
Horseradish Cream : 6 jars	Fish Paste : 5 jars
Almond Kernels : 376 pkts.	Salted Almonds : 7 pkts.
Custard Powder : 90 pkts.	Baking Powder : 28 lbs.

Slaughter of Animals Act, 1933.

9 Licenses to stun or slaughter animals were issued and no offences were committed.

Food Premises.

The number of registered premises in the town was as follows:—

Bakehouses	...	...	...	...	...	4
Tripe Boilers	...	...	...	...	...	2
Preparation and manufacture of sausage, pressed, pickled or preserved foods	...	...	...	...	...	10
Fish Friers	...	...	...	...	...	22

Frequent inspections of the above premises were made and there were no serious complaints.

The Council scheme to re-organize the market progressed still further and certain food stalls were brought under cover. This scheme is not progressing very fast and I would like to see all food premises properly protected.

Ice Cream.

By the end of 1952 there were 59 registered premises for the sale of Ice Cream and one registered for manufacture. There was thus an increase of 5 registered premises over the previous year. All ice cream sold in the shops was prepacked and each shop was supplied with a continuous supply of hot and cold water. There were no complaints regarding ice cream during the year. Strict control was kept over the street vendors' cars which came into the district from outside and the standard of these seemed to be reasonable.

33 samples of ice cream were taken for bacteriological examination and as a result 19 were placed in Grade 1, 2 in Grade 2, and 1 in Grade 4. The unsatisfactory sample was taken from a street vendor's car which came into the district from another area. The matter was taken up with the Public Health Department of that particular area.

Milk Production.

The number of registered milk distributors in 1952 was 42; this was an increase over the number of the previous year.

Licences issued for the sale of graded milk were as follows :

Supplementary Licences (Tuberculin Tested)	...	2
„ „ (Pasteurised)	... ..	2
„ „ (Sterilised)	... ..	2
Dealers' Licence Sterilised Milk	... ..	9
„ „ Pasteurised Milk	... ..	1
„ „ Tuberculin Tested	... ..	1

There was only 1 retailer selling loose milk, all the other retailers receiving milk for resale from one of five major distributing companies.

There were no complaints about the quality of milk during the year but some complaints were received regarding dirty milk bottles. This took place while one company was installing new bottle washing plant and the matter was quickly remedied.

Factories.

The number of factories has fluctuated slightly during the past few years and in 1952 there were 59 factories on the register, 51 with power and 8 with non-power. A total of 111 inspections were carried out. It was found that several of the small textile factories which were opened just after the war to take overflow work from the parent factories in West Yorkshire were closing rapidly. Some of the employees were offered work at the parent factory and were transported in motor coaches.

Almost the whole of the industries in the Urban Area were of a small nature.

The following defects were found and remedied :—

Want of cleanliness	...	...	...	...	...	...	...	2
Insufficient sanitary conveniences	...	...	...	...	...	...	...	1
Unsuitable or defective sanitary conveniences	...	...	...	...	...	...	...	3

Hairdressers.

Under the West Riding County Council (General Powers) Act 1951 the Council for the first time were given powers of registration of hairdressers premises. A survey of these was made and it was found that there was a total of 31 hairdressers in the district, of which 11 were gentlemen's hairdressers and 20 ladies' hairdressers. The gentlemen's hairdressers were reasonably satisfactory but it was found quite a number of ladies' hairdressers were operating in front rooms of houses without a supply of water provided and without means of drainage. It is hoped to convert all the unsatisfactory premises in the near future and the Council agreed to install drainage to one ladies' hairdressers premises owned by them.

Public Cleansing - Refuse Collection.

The refuse collection service was in the hands of five Karrier Bantam vehicles manned by 15 refuse collectors and 5 drivers. The weekly collection service was generally maintained during the year but again the main problem was suitable and satisfactory labour. There appeared to be so many better paid attractions in the district that it was found difficult to retain a full staff. The type of employee obtained from the Ministry of Labour was in many cases found to be either unsatisfactory or not desirous of hard work. For the past few

years the service has depended on a nucleus of experienced workmen who have been in the Council service for several years, and the short term workers who are not interested except to wait their time to obtain another job. A total of 275,393 bin premises were cleansed and a total of 4,450 loads of refuse dealt with. In addition, 19 pail closets at Wragby Row were emptied weekly. The weight of refuse in the district remains high and particularly as bad quality coal is often disposed of by the householder in the dustbin. With the erection of new houses and flats in the district the collection areas are increasing.

The Council were responsible under the Municipal Bin Scheme for the replacement of defective bins and in 1952 some 366 bins were renewed. It was found that bins were comparatively easy to acquire and by the end of the year the number of defective bins outstanding in the district had been considerably reduced.

Refuse Disposal.

The town's refuse was disposed of at two sites by controlled tipping. The cleaner refuse was tipped at King's Road quarry and the remainder at the Pastures Road site. King's Road quarry was tipped in layers and it is estimated that this site will be completed in approximately twelve to eighteen months. This then gives approximately another three to four years on the Pastures Road site when it is hoped that further negotiations with the National Coal Board will open up a new field. If this fails, the refuse collection problem will then assume that of a major crisis. It was found that large quantities of soil could be obtained for the tips from excavations on the housing sites.

The total cost of refuse collection and disposal was around £9,300. The large increase over that of the previous year was again due to increased petrol tax and increases in labour costs. There has been a steady increase in the cost of refuse collection and disposal since 1940 and it is hoped that the highest peak has now been reached. The vehicles, although still giving very satisfactory service, are requiring more maintenance, which factor also adds to the cost of the service.

Salvage.

Income from salvage was £1,319/13/2d., the major part of which was obtained from the sale of waste paper. This figure was £900 less than that for 1951 and was due to the fact that a quota of 10 tons per month was imposed by the Waste Paper Merchants and there were several large decreases in the price. It was found that the public were not as salvage minded as they had been during the war years, but in spite of this more paper was obtained than could be disposed of to the merchants. The individual figures were as follows :—

Waste Paper	...	...	...	121 tons	9 cwts.	3 qrs.
Textiles	...	...	...	1 ton	11 cwts.	3 qrs.
Ferrous Metal	...	...	...	—	13 cwts.	—
Tin cans	...	...	...	2 tons	10 cwts.	—
Bottles	...	...	...	92 dozens.		

Since salvage commenced in July, 1940, the total amount of income derived from the sale of salvage material had reached the figure of £10,101/3/8d.

Conclusion.

The district is fast becoming overcrowded with houses as every available plot of spare land is being taken for building purposes, this tending to reduce air space to other properties. The rate of demolition of old properties is very very slow and until Slum Clearance can be initiated on a large scale, housing problems will remain. As the clearance of old property is bound up with the provision of new houses I cannot see an early solution to this problem, unless land from adjoining local authorities is acquired for housing purposes.

Tipping space for the disposal of refuse was readily available at two sites in the Urban District but it is quite likely that in another two to three years time, available land will again be becoming scarce unless further negotiations can be carried out with the National Coal Board for an extension to one of the present sites on the Pastures Road. This matter should be kept in mind and considered in the next two years.

The imposition of a quota on the sale of waste paper together with a considerable reduction in prices had a great effect on salvage income. The scheme still paid for itself in 1952 but it is my opinion that with any further serious price reductions, consideration will have to be given to the matter to prevent it becoming a burden on the rate funds.

One great advantage gained from the salvage of waste paper has been that the refuse tips have not had to be used for the disposal of waste paper and cardboard, thus reducing sinking and danger from fires.

The standard of hygiene by the food traders in the town has been reasonable and there were no cases of food poisoning attributed to dirty food. It has been found that the traders are most willing to co-operate with the department and are anxious to bring their problems forward for discussion. I would like to see, however, the market reorganization carried still further particularly with the fish stalls. Although this has been agreed by the Council, the work necessary has been rather slow.

The vetting of respective Council tenants has proved, to my mind, successful, and unsatisfactory tenants are now at a minimum. The number of bug infested premises has been considerably reduced over the past few years and although the struggle is a lengthy one I feel that the education of some of our tenants is beginning to show results.

The employment of a full time Rodent Operator, Mr. J. Jones, has gone quite a long way to a big reduction in the rodent population, and the Ministry of Agriculture and Fisheries Rodent Inspectors have had no complaints.

Atmospheric pollution, though reduced slightly, is still one of the major problems of this district, due, I think, generally, to colliery chimneys in the district and domestic flues. The solution of this problem is nowhere imminent until a better type appliance is installed in the home.

May I say how much I appreciate the assistance of Doctor J. Leiper, the Medical Officer of Health, particularly in the many problems which have arisen during the past year. I would also compliment the Chairman of the Public Health Committee, Councillor J. C. Willetts, for his interest and co-operation and also the Council for their ready support in the work of the Department.

I would also like to record my appreciation of the work of the staff of the Department and thank them for their assistance in the compilation of this report.

I remain,

Mr. Chairman, Lady and Gentlemen,

Your obedient Servant,

H. BREARLEY,

Chief Sanitary Inspector.
Cert. S.I.B., M.S.I.A., Cert. Insp.
of Meat and Other Foods

